

Application for Continuing Education Credit Assessor/Deputy Assessor Form

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Print legibly or type:		
Name:		
Jurisdiction: Title:		
Course name:		
Sponsoring organization:		
Date of program:		
Location:		
Hours of credit requested: Tested	Non-tested	(Attach test results)
Are the hours for a self-study course? Self–study is a course taken online at your ow	Yes □ ⁄n pace.	No □
Are the hours for a virtual course? Virtual is a course taken where the instructor of the instru	Yes □ can see and interact with y	110 🗀
ATTENDANCE CERTIFICATION:		
I certify that I have attended the indicated sessions applying credit.	of the above-described p	orogram for which I am
I, the undersigned, declare under penalties of perjudocument, and, to the best of my knowledge and beli		
Signature of applicant:	Date:	
Signature of instructor or sponsoring official:		

ed.dov.eq@iowa.gov

Email as a PDF to: